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Application

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Address to: Examiner Name **Not Yet Known** RECEIVED **Assistant Commissioner for Patents** Attorney Docket Number P-3030-US Washington, D.C. 20231 NOV 1 **1-200**2 Please change the Correspondence Address for the above-identified application Technology Center 2600 П **Customer Number** Place Customer Number Bar Code Type Customer Number here Label here OR Firm or Eitan, Pearl, Latzer & Cohen Zedek, LLP. Individual Name 10 Rockefeller Plaza Address Address **Suite 1001** ZIP 10020 **New York** State | New York City Country U.S.A. 212-632-3480 Fax 212-632-3489 Telephone This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). I am the: Applicant Assignee of record of the entire interest. Certificate under 37 CFR 3.73(b) is enclosed. \boxtimes Attorney or agent of record. Typed or Mark S. Coher Registration No. 42,425 **Printed Name** Signature

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